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TITLE: Substance Use and High-Risk Sexual Behaviors Among Persons With HIV Infection
Accessing Medical Services in a Public Health Care System

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BACKGROUND: Due to current therapeutic interventions, persons with HIV infection experience decreased morbidity and mortality and enjoy improved health for extended periods of time. As a result, however, high-risk behaviors may be continued or resumed and hence increase the risk of ongoing HIV transmission. Surveillance is needed in this population to monitor risks and to guide the development of interventions aimed at risk reduction.

OBJECTIVES: To study sexual behaviors and factors associated with high-risk sexual behaviors among HIV-infected persons accessing medical services in a public health care system.

METHODS: As part of the CDC-supported Supplement to HIV/AIDS Surveillance (SHAS) project, HIV-infected persons who receive primary or specialty care within the Denver Health medical system are invited for a one-time interview eliciting detailed information on demographic and socioeconomic characteristics, drug and alcohol use, sexual behavior and STD history, medical and social services, reproductive/gynecological history and child health, preventive therapy, and disability. For this study, we evaluated sexual behaviors and factors associated with high-risk sexual behaviors for persons enrolled since 1995.

RESULTS: A total of 748 persons were evaluated (73 women and 675 men). Of these, 592 (79%) reported sexual activity in the previous 12 months. Sexual activity was associated with age younger than 36 (odds ratio [OR] 2.5; 95% confidence interval [CI] 1.7- 3.7), the absence of an AIDS diagnosis (OR 2.0; 95% CI 1.4 - 2.9), and non-injection drug use (OR 1.8; 95% CI 1.3 - 2.6). Among sexually active persons, the median number of partners in the previous 12 months was 1 (range 1 - 300). Consistent condom use was reported by 49% of sexually active persons. In addition to sexual activity in the previous 12 months (see above), non-injection drug use was also associated with having more than 3 sexual partners in the previous year (OR 2.2; 95% CI 1.4 - 3.5), and having used condoms inconsistently (OR 1.7; 95% CI 1.2- 2.6). Of all sexually active persons, 70% reported non-injection drug use. Drugs most frequently used in this group, included marijuana (61%), cocaine (39%), crack (23%), amphetamines (18%), and nitrite (13%).

CONCLUSIONS: The large majority of persons with HIV infection in our population are sexually active. Sexual activity is reduced among persons diagnosed with AIDS, suggesting the possibility that measures to slow down the development of AIDS (i.e. anti-retroviral therapy) may indirectly increase sexual activity. The extent of unsafe sexual behaviors in this population warrants ongoing behavioral interventions aimed at risk reduction. The widespread use of non-injecting drugs and their association with unsafe sexual behaviors, suggest that these interventions should focus on substance use. Further studies are necessary to better understand the relationship between substance use and (high-risk) sexual behaviors among persons with HIV infection.

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